

Activation of Active Travel Grant Commissioning Application Form

1. Applicant details				
Which project is this application for? (please tick box) If you are applying for more than one project, you will need to complete separate application forms for each project.				
Supporting cycle commu	ıting			
Accessible cycling event	s			
Widening participation in	ı walking			
Project Applicant - Nar	ne of person and orga	nisation submitting applica	tion form:	
Organisation type:				
FE College				
Charity				
For profit business				
Government organisa	ation			
Not for profit organisa	ation			
Other (please specify	/):			
Please provide compand not applicable):	ny registration numb	er or registered charity n	umber (leave blank if	
Is your organisation V	AT registered?			
Yes		No		
If Yes, please provide your VAT Number. Please note VAT reclaimable from HMRC is ineligible.				
Name of the individual with overall responsibility for the project:				
Name of Project Contact:				
Applicant Address - Please provide the address of the individual/organisation submitting the application:				

Applicant Postcode - Please provide the postcode of the individual/organisation submitting the application:
Contact Email - Please provide the email of the individual/organisation submitting the application:
Contact Number - Please provide the phone number of the individual/organisation submitting the application:

Please provide a summary of your proposed project. This should include:
An outline of the proposed project.The target population.
 The target population. The project aims and objectives.
 How the proposed project fulfils the relevant project specification.
3. Project Delivery
3.1 Delivery of Outputs and Outcomes Please outline what your intended outputs will be for this project and how you will ensure that these are monitored and delivered. Your answer should include:
 An indication of your intended numerical outputs for the project (this must include the
minimum outputs detailed in the project specification, however additional outputs are welcomed).
 Details of the plans and processes you have in place to ensure that these are delivered.
 An outline of your approach to monitoring and reporting these outputs.
3.2 Project Plan
Please provide a clear project plan including:
 Activities to be delivered and relevant timescales. Key milestones including achievement of certain outputs.
 An indication of monitoring and reporting timescales.
Contrabarta or other viewal representations may be included and will not equal towards the
Gantt charts or other visual representations may be included and will not count towards the character limit.

2. Summary of the Activation of Active Travel project.

 3.3 Project Management Please describe how the project will be managed. Your answer should include: Identification of the key personnel who will be involved, their role, and details of their relevant qualifications and experience. A person responsible for ensuring the project meets its objectives and delivers its benefits should be named. If any other organisations will be involved in the project, please provide relevant details of their involvement. 					
3.4 Risk Please summarise your overall approach to managing the key risks for project delivery and complete the risk register below.					
Please include details of the relevant policies and procedures that are in place such as safeguarding, DBS checks, insurance and data protection policies.					
Project Risk Register					
Number	Risk Detail	Mitigating Actions	Likelihood (RAG)	After mitigation (RAG)	
1					
2					

4. Project rationale		
4.1 Requirement for Grant Outline why the project is needed and how will it address this need. What evidence do you have of demand for the project?		
4.2 Please outline the key co	omponents of expenditure and overheads of your project.	
For applicants who are able to VAT cannot be claimed as a contract to the cont	o recover VAT from HMRC (e.g. VAT registered businesses), then cost against the grant.	
	ost in the left-hand column and an explanation of this cost in the cost of the project should equal the total value of the grant funding	
Cost (£)	Detail of expense	
	TOTAL	
5. Experience and capacit	ty	
	d organisational capacity s experience and how it is relevant for the delivery of this project. nisation has the capacity to deliver this project.	

6. Declaration

I am content for information supplied here to be stored electronically and shared in confidence with other public sector bodies who may be involved in considering the case.

I confirm as the applicant I have not committed, nor shall commit, any Prohibited Act.

I understand that if I give information that is incorrect or incomplete, the grant may be withheld or reclaimed, and action taken against me. I declare that the information I have given on this form is correct and complete.

I confirm that I have full authority from the appropriate level within the applicant organisation to enter into this application and any subsequent Funding Agreement.

I understand that any offer may be publicised by means of a press release giving brief details of the project and the grant amount.

I confirm that any activity relating to the information provided here will be of an inclusive and non-discriminatory nature and incorporate the diversity and inclusivity practices of Preston City Council.

Signed	
Print Name	
On Behalf of	
Position within organisation	
Date	